

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | | 25 | 12-30-99 |
| FORMALITY REVIEW | | | |
| RESPONSE FORMALITY REVIEW | S A | 68966 | 2-15-00 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 + Restricted O Objected

| Claim | Date |
|----------|----------|
| Final | |
| Original | |
| 1 | 4-26-99 |
| 2 | 7-11-99 |
| 3 | 6-10-99 |
| 4 | 11-20-99 |
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| Claim | Date |
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| Claim | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

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